

3270 N, AZ Hwy 87 – Mile Marker 267 PO Box 90 – Pine AZ 85544 (928)476-3349

08/22/11

Gila County Board of Supervisors

Attn: Marion Sheppard

1400 E. Ash St Globe. AZ 85501

Subject: Liquor premises temporary extensions

Attached is our application for a temporary liquor extension for 2 upcoming charity events to be held at Rimside Grill.

Evaluable ! The Constitution of Indian Chartelland Runifold Mathibury a nor (Reduction Inc (501-3C)

Please let us know if you have any questions.

Thank you.

Tamara & Steve Morken

602-909-4790 Tamara cell

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Justice McNealy Children's 5013C char

10/1 OctoberFest

Pine-Strawberry

Fuels Reduction

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ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 6th Floor Phoenix AZ 85007-2934 www.azliquor.gov (602) 542-5141

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

THIS APPLICATION MUST BE RETURNED TO THE DEPARTMENT OF LIQUOR Permanent change of area of service - Give specific purpose of change: ▼ Temporary change for date(s) of: 9/17/11 & 10/1/11 Licensee's Name: Morken Tamara Lynne First Middle Last Pine 85544 Mailing Address: PO Box 90 AZ Business Name: HTNB Ventures LLC dba Rimside Grill & Cabins 11043006 LICENSE #: Pine AZ 85544 Business Address: 3270 N Highway 87 Gila COUNTY State Business Phone: (928) 476-3349 602) 909-4790 Residence Phone: FAX# (928) 476-4001 Do you understand Arizona Liquor Laws and Regulations?

YES
NO 4/28/2009 Have you received approved Liquor Law Training? I NO I YES When? What security precautions will be taken to prevent tiquor violations in the extended area? Security personnel, fencing signage, and all staff members have been trained and understand the liquor laws. 9. Does this extension bring your premises within 300 feet of a church or school? 🔲 YES 🖾 NO 10. IMPORTANT: ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED FREMISES AND WHAT YOU PROPOSE TO ADD ****After completing sections 1-9, take this application to your local Board of Supervisors, City Council or Designate TO INDUSTRIED TO A TOPONING SET TO A CONTROLL OF THE PROPERTY OF THE PROPERTY OF THE SET OF THE SET OF THE SET (Authorized Signature) (Title) (Agency) Tamara Lynne Morken being first duty sworn upon oath, hereby depose, swear and declare, (Print full name) under penalty of perjury, that I am the APPLICANT making the foregoing application. I have read this application and the contents and all statements are true, correct and complete Notary Public State of Arizo County of Gila County SUBSCRIBED Julie Pugel My commission expires on: 8/2 Signature of NOTARY PUBLIC) Investigation Recommendation [] Approval Disapproval Date: Director Signature required for Disapprovals Date:

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*Disabled individuals requiring special accommodation, please call the Department(602) 542-9027.

